## **REMARKS**

The application as filed included claims 1-65. No claims have been cancelled. Hence, claims 1-65 remain pending in the application.

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As a preliminary matter, claims 15, 19-42, 44, 47, 53, 56 and 63 are objected to as being dependent upon a rejected base claim. The Office Action advises that these claims would be allowable if rewritten in independent form including all of the limitations of the base claim and any intervening claims.

Recognition of allowable subject matter defined by the above objected to claims is greatly appreciated. However, amendment of these claims into independent form is respectfully being reserved pending reconsideration of the rejected claims.

With respect to the recognized allowable subject, it is wondered why claim 14 has not also been objected to in view of the recognized allowable subject matter defined in objected to claim 63. Claim 14, when read with claims 12 and 1 from which it depends, defines subject similar to that defined in objected to claim 63 when read with claims 62 and 55, the claims upon which it depends. More specifically, claim 14 defines that "the surface area of the force distributor is greater than the surface area of the force applier" in a manner as similarly defined in claim 63. It is agreed that this is not shown, described or even suggested in Solem et al. Favorable reconsideration of claim 14 is therefore respectfully requested.

With respect to the rejections, claims 1-14, 16-18, 43, 45, 46, 48-52, 54, 57-62, 64, and 65 stand rejected under 35 U.S.C. 103(a) as being unpatentable over Solem et al., U.S. Patent No. 6,210,432. This rejection is respectfully traversed. It is respectfully submitted that each of the above noted rejected claims defines subject matter not shown,

described, or even suggested in Solem et al. Favorable reconsideration of these claims is therefore respectfully urged.

Solem et al. is directed to a device allegedly adapted to treat mitral regurgitation.

Two embodiments of Solem et al. are alluded to in the Office Action in support of the 35 U.S.C. 103(a) rejection.

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The first mentioned embodiment is that of FIGS. 12 and 13 of Solem et al. Here, stents 23, 24, and 25 are employed as anchors within the coronary sinus. Wires 26 and 27 are connected to the stents and may be maneuvered from outside the vein system to reduce the distances between the adjacent stents 23, 24 and 24, 25. These distances are reduced asymmetrically, *i.e.*, more on the side of the coronary sinus 5 most adjacent to the posterior part of the mitral valve annulus 6 to bend the device assemblage for pressing the coronary sinus against the mitral valve annulus.

The entire device is bent, contrary to the interpretation of Solem et al. advanced in the Office Action. The only function of stents 23, 24, and 25 is to anchor. Only when the wires 26 and 27 are added and manipulated does the Solem et al. device of FIGS. 12 and 13 do anything to affect the mitral valve annulus. The only such affect described in Solem et al. is to reduce the circumference of the mitral valve annulus to thereby close gap 20. To do this, the Solem et al. devices maintain continuous contact of the entire bent device (the stents and wires of FIGS. 12 and 13) with the coronary sinus.

The Solem et al. device of FIGS. 10 and 11, the other embodiment alluded to in the Office Action, functions in a similar manner. Here, the device is an open U-shaped ring that engages the wall of the coronary sinus adjacent the mitral valve annulus. When the

ring reverts to its original shape, it bends to supposedly achieve the only function described of reducing the circumference of the mitral valve annulus.

The invention defined in the pending claims is completely different from the devices described in Solem et al. In contrast to Solem et al., the pending claims define a device or method wherein a force applier (device) or an applying step (method) applies an applied force to a discrete portion of the atrial wall of the coronary sinus to concentrate the applied force on a discrete portion of the mitral valve annulus. This structure, function, and methodology is not to be found anywhere in Solem et al. Nowhere in Solem et al. is it even suggested that a force may be applied to a discrete portion of the coronary sinus to obtain the desired effect. Again, the devices of Solem et al. only provide continuous pressure along the device as the bending devices bend the mitral valve annulus.

The stents, contrary to the interpretation of Solem et al. advanced in the Office Action, do not provide the structure and function as defined in the rejected claims. The stents only serve as anchors. They themselves do not have <u>any</u> therapeutic effect. Only when the wires are added to the stents and manipulated will the Solem et al. device of FIGS. 12 and 13 do anything at all to achieve the sole affect on the mitral valve annulus described in Solem et al.

Lastly, the embodiment of FIGS. 10 and 11 is relied upon for the description that the U-shaped ring may be formed of shape memory material. It is respectfully submitted that the structure of the Solem et al. device of FIGS. 10 and 11 has nothing to do with the Solem et al. device of FIGS. 12 and 13 except that they both provide continuous contact with the coronary sinus for bending it when the wires 26 and 27 are manipulated (FIGS. 12 and 13) and when the open U-shaped ring returns to its original shape (FIGS. 10 and 11).

The open U-shaped ring of shape memory material (FIGS. 10 and 11) has a completely different function than the stents of FIGS. 12 and 13. The wires of FIGS. 12 and 13 need not be formed of shape memory material because when connected to the stents and manipulated, the device will bend without the need for shape memory material.

In view of the foregoing, it is not seen how what is shown and described in Solem et al. could, in any way, render the subject matter defined in rejected claims 1-14, 16-18, 43, 45, 46, 48-52, 54, 55, 57-62, 64 and 65 obvious. Reconsideration of these claims and withdrawal of the 35 U.S.C. 103(a) rejection is respectfully urged.

The application is considered to be in condition for allowance. Such favorable action is respectfully requested.

Should a telephone conference with the undersigned be considered helpful in resolving any outstanding issues and advancing the application to issue, such a conference with the undersigned is invited and would be gratefully appreciated.

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Respectfully submitted,

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